### FORM D

GEG Mail Processing Section

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

FFA 5 2 5008

Washington, DC

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30,2008
Estimated average burden
hours per response.....16.00

SEC USE ONLY						
Preflx	Serial					
DATE RECEIV	ED					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	<del></del>
\$5,000,000 Senior Secured Rural America Bond	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOF	
Type of Filing: New Filing Amendment	·
	IVA BANTAL LAVA BANKA JURBO MWALIJAPRO KAMILANDI AKAN
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	08021884
Rolling Meadows Investments, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Num	ber (Including Area Code)
12469 West SR 100, Lake Butler, Florida 32054	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Nur (if different from Executive Offices)	nber (Including Area Code)
Brief Description of Business	
real estate	
	OCCED
Type of Business Organization	PROCESSED
corporation [ limited partnership, already formed [ other (please specify):	
business trust Iimited partnership, to be formed Limited liability company	FEB 2 8 2008
Month Year	SUCCESION
Actual or Estimated Date of Incorporation or Organization: 04 06 Actual Estimated	THOMSON
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	FINANCIAL

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

— ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDI	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			
<ul> <li>Each promoter of t</li> </ul>	he issuer, if the iss	uer has been organized w	ithin the past five years;		
<ul> <li>Each beneficial own</li> </ul>	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
<ul> <li>Each executive off</li> </ul>	cer and director o	f corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
<ul> <li>Each general and n</li> </ul>	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			A++-	
Business or Residence Addre 12469 West SR 100, Lak		-	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	£	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	÷ 1444, 4			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	, <del>_</del> .	<u> </u>

		<del></del>		· <del>·</del>	B. IN	(FORMA'TI	ON ABOU	f offeri	NG				
<u> </u>												Yes	No
1.	Ilas the	issuer sold	, or does th								,		
_	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?										<b>c</b> 100	,000.00	
2.											Yes	No	
3.											K		
4.	If a pers or states a broker	sion or sim on to be lis i, list the na or dealer.	ilar remune ted is an ass me of the b you may so	ration for s ociated pe roker or de at forth the	olicitation rson ur age aler. If me	of purchase nt of a brok ire than five	rs in conne er or deale (5) persor	etion with r registered is to be list	sales of sec I with the S ed are asso	urities in th EC and/or	irectly, any he offering, with a state ons of such		
Full	Name (I	last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Nan	ne of Ass	ociated Br	oker or De	uler	<del></del>		<del></del>						
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Stai			or check						**********			□ All	l States
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	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
	RI	SC	SD	(TV)	TX	UT	VT	VA	WA	WV)	WI	WY	(PR)
Ful	Name (	Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address ()	Number an	d Street, C	ity, State, 2	Zip Code)					v	
Nar	ne of As	sociated Bi	oker or De	aler	<del></del> ·			<del></del>		<del></del> ,			<del></del>
Sta	tes in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			·-··	···-	·	<u> </u>
	(Check	"All State:	s" or check	individual	States)	***************************************		***************			***************************************	□ ∧!	1 States
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		IN	IA	KS	KY	I.A	ME	MD	MA	MI	MN	MS	MO
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Col	RI		first, if ind										
rui	i Name (	Last name	11151, 11 100	- TVIGUAL)									
Bu	siness or	Residence	Address (	Number an	d Street, C	lity, State, i	Zip Code)						
Na	me of As	sociated B	roker or De	alet					· · · · · · · · · · · · · · · · · · ·				
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	(Check	"All State	s" or check	individua	l States)	•••••				,,		□ A1	II States
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	TL.	[N]	IA	KS	KY	LA	ME	MD	MA	M	MN	MS	MO
	MT RI	NE SC	NV SD	NH)	NI TX	NM UT	<u>NY</u>  VT	NC VA	(ND) WA	OH WV	OK WL	OR WY	PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this hox and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	5,000,000.0	0	5,000,000.00
	Equity			\$
	Common Preferred			
	Convertible Securities (including warrants)	<u> </u>		s
	Partnership Interests	s	_	<b>s</b>
	Other (Specify )	S	_	\$
	Total	5,000,000.0	0	5,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate Dollar Amount of Purchases
				\$ 5,000,000.00
	Accredited Investors		-	
	Non-accredited Investors	_		\$
	Total (for filings under Rule 504 only)		-	\$
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		-	<u> </u>
	Regulation A		-	<u> </u>
	Rule 504		-	\$
	Total		-	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	[	J	\$
	Printing and Engraving Costs			s
	Legal Fees	[	)	5
•	Accounting Fees	[		\$
	Engineering Fees	[		S
	Sales Commissions (specify finders' fees separately)	[		s
	Other Expenses (identify) Origination Fee		7	\$_50,000.00
	Total		_ 7	\$ 50,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers. Directors, & Affiliates	Payments to Others
	Salaries and fees	s	
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery and equipment		
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		. <b>s</b>
	Repayment of indebtedness	\$	
	Working capital	\$	. 🗆 s
	Other (specify): Refinance existing debt acquired for purchase of real estate and to	s	<b>∠</b> \$ 4,950,000.00
	construct the infrastructure of the real estate		
			s
	Column Totals	\$ 0.00	s4,950,000.00
	Total Payments Listed (column totals added)	□ \$_4,	950,000.00
	D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of l	isian, upon writte	ale 505, the following on request of its staff,
	der (Trink or Type)	Date 2/14/	191
	olling Meadows Investments, LLC	- orde	
8	me of Signer (Print or Type), Wery C. Koberts Title of Signer (Print or Type) Managing Member		
<u>-</u>			

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes . []	No <b>€</b> C
	See Appendix, Column 5. for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is D (17 CFR 239.500) at such times as required by state law.	i filed a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, inform issuer to offerees.	ation furr	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be c limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer cl of this exemption has the burden of establishing that these conditions have been satisfied.	ntitled to aiming the	the Uniform availability
	suer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its bel uthorized person.	half by the	undersigned
	(Print or Type)  Meadows investments, LLC  Signature  Date  2/14	08	
Name (I	Print or Type)  Very C. Roberts  Title (Print or Type)  Managing Member		

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AF	PENDIX				
***************************************	Intend to non-a investor	i to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Number of Accredited Non-Accredited Investors Amount Investors Amount				Yes	No
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				APP	ENDIX								
1	Intend to non-a investor	2 I to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State					Type of investor and		under Sta (if yes, explana	ition of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
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				APP	ENDIX					
1	to non-a	d to sell accredited rs in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and  amount purchased in State  (Part C-Item 2)				under St (if yes explan waiver	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

